

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	2/14
O.I.P.E. CLASSIFIER		10	2-28-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	AB	70003	4-14

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	9/13/02
2	2/10/03
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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